

Signature

City of Grand Marais

Application for Board or Commission

Date

| Name of Applicant: | |
|--|---|
| Mailing Address: | |
| Residency Address (if different): | |
| Board Applying For: | |
| An information packet is available with a description of the board, member responsibilities and meeting requirements. Please answer the following questions in order to provide the City Council with your qualifications and interests. | |
| Explain why you service: | u are interested in this board and what you hope to accomplish through your |
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| 2. What skills, expertise or knowledge will you bring to the board: | |
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| 3. How have you l | peen involved in the community: |
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